



EmployeeUPDATE

Our Mission: To serve the people of North Carolina by enabling individuals, families and communities to be healthy and secure, and to achieve social and economic well-being.

A monthly publication for employees of the North Carolina Department of Health and Human Services

Departmental Website to be Overhauled

DHHS has a vast presence on the Internet. Tens of thousands of web pages inform tens of thousands of readers each month on all subjects, from adoption to West Nile Virus, from child care to long-term care. The department is embarking on a project to redesign the site to make this information easier to find, searchable and translated into Spanish.

"I'm convinced that the information we have on our websites is beyond compare in state government. Our site is detailed and informative, and we can be very proud of it. The problem is that we put the public through so much as they try to navigate through the site with its 90-plus home pages," said Linda Povlich, DHHS Senior Advisor, who is overseeing the project.

"With the redesign, I want us to dream big, for better overall design, usability and functionality. I'd like us to stand out as providing excellent service to all of the people who rely on us."

The new site will be organized into four portals, one each for residents, researchers, state and local government, and providers. Information for residents will be written at a 6th-grade level and will focus on the services. Information for researchers will include all of our statistics and publications. The



Linda Povlich

provider portal will be for all of those we regulate or license or contract with. The government portal will include information for DHHS employees, plus information for local agencies, such as forms and manuals.

See Website page 6

Your Location: Division of Medical Assistance >> Medicaid for Providers >> Providers' Library

The new website will have a "breadcrumb trail" which will tell users exactly where they are in the website and allow them to jump back to previous pages easily.

DHHS Home | A-Z Topics | DHHS Divisions and Offices | How to Reach Us | Espanol

Search

The new website will have several options for navigating the site that will appear on all pages. Called "utility links," users will be able to count on alternative ways to find information.

INSIDE TOP FEATURES

Katrina, Pages 2 & 3
DHHS Steering Committee, Page 4
Adoption Story, Page 10

**Protect Yourself
from the Flu**

➔ Page 7



**Katrina
Backpacks**

➔ Page 9



N.C. SMAT II teams provide critical medical care to stricken area

4,800 seen for ailments, injuries

Hundreds of members of North Carolina's State Medical Assistance Teams (SMAT) are providing medical services to thousands of residents in the Waveland, Miss., area as part of the response to the citizens of the Hurricane Katrina-ravaged Gulf Coast.

A group of 98 medical professionals and a convoy of 39 vehicles and trailers were deployed by the N.C. SMAT and the Regional Advisory Committee teams Sept. 2. The initial group was comprised of paramedics, nurses, physicians, pharmacists, law enforcement, N.C. Office of Emergency Medical Services staff and others from four of the state's SMAT II and III mobile medical units and Charlotte's Carolinas Medical Center MED-1 mobile hospital.

The destination: the Kmart parking lot in Waveland Miss., where the portable hospital and ancillary services sprung up practically overnight. Waveland took the brunt when the hurricane moved ashore Aug. 29 and nearly all was destroyed, including the community's Hancock Regional Hospital. A storm surge washed miles of houses from their foundations and covered the Kmart, two miles inland, under 28 feet of water.

After the first week of operation SMAT team leader Holli Hoffman called for assistance from N.C. Public Health Preparedness and Response to check on public health hazards associated with the after-effects of the storm. PHPR Team Leader Will Service, an industrial hygienist, said he deployed with an initial team of seven, including a physician epidemiologist and environmental health specialists.

"When we first arrived, there was gastroenteritis, illness, rashes," Service said. "The environment was in horrible shape. The response team was dropped into the middle of a giant catastrophic mess down there with bodies, storefronts blown out, no food, no water and no electricity. So there were a lot of environmental health issues.... We addressed those things for the hospital so they could keep running."

The mobile hospital and SMAT units operate on a rotational schedule that allows for restocking of supplies, and fresh replacement responders every week, including PHPR staff.

"We have rotated 380 medical personnel in there who have administered medical aid to 4,800 patients," said Drexel Pratt, chief of the N.C. Office of Emergency Medical Services. He said staff rotations of 60 or 70 specialists per week are making the trip to Mississippi. The rotations will likely continue through mid- to late October.



Thus far, the group has mostly provided outpatient care to a range of patients from youngsters to the elderly, mostly with wounds and injuries from the ongoing debris cleanup. There also have been cardiac and diabetes patients, and several people with gastro-intestinal disorders attributed to food and water contamination, and several patients with rashes, Pratt said.

The North Carolina response incorporates personnel and equipment from acute care hospitals and emergency medical services across the state, all coordinated through the state's seven Regional Advisory Committees (RAC) on trauma. The lead trauma center in each RAC is coordinating the staffing for these units from member hospitals of the RAC.

"It is incredible to see the whole schematic now," said Hoffman, who returned to Waveland on Sept. 27 for the first time in nearly three weeks. "There is a mobile dental clinic, health department clinic, mobile pharmacy, three staff tents, three supply tents, a mobile CT scanner, a dining tent for

See SMAT page 3

SMAT cont. from Page 2

staff, a mobile shower trailer, and other support trailers. Around the camp now the FEMA Disaster Recovery Center has set up to process housing for the people, the American Red Cross is now on scene for financial recovery assistance, and multiple insurance companies have set up.”

In a place where there suddenly was nothing but rubble, something is happening around the portable medical center.

“It has become ‘the city’,” she said. “People gather there daily in huge numbers. Wal-Mart has even set up a tent out front to sell critical items. There is still no power or water, so generators are everywhere. However, the power is getting back to our area this week and we hope this is the beginning of a huge build out.” ■

1. This was our first flight out of the hospital. We were able to flag down a Coast Guard chopper for the patient’s transport to medical facilities at the University of Alabama. We had flight nurses and paramedics on each deployment and they are able to make the flight with the patients if needed. This section of the parking lot was cleared off by our staff. They borrowed a loader and moved destroyed cars and rubble. Rowan County’s Swift Water Rescue happened to be there on another mission and blew the parking lot off with their air boats. We painted a hot pink H on the lot and were in business with our own heliport. At night we took milk jugs, filled them with water and put fluorescent glow sticks in the jugs to light the pad for night flights. About two days after this, our guys found the bottom of a stop light and wired it to the remaining parking lot light poles. They wired it to the generator to keep the choppers away from the light poles at night.

2. This seven-year-old girl was treated for a minor injury. Her dog had a broken hip. The girl was treated and released. The dog was x-rayed at our facility. We searched for a veterinarian to set this dog’s hip, because there were none in our area. We found a



Veterinarian Medical Assistance Team (VMAT). These are federal teams that respond for animals, like we do for humans. This day was the girl’s birthday and the staff ended up singing Happy Birthday and making a big deal of her. Someone donated stuffed animals and we were able to give her one. She clung to this dog as you can see.

3. This is the general treatment area. Patients are triaged and then sent here for general treatment. If the patients are considered more serious they are sent inside the internal hospital. This is the area where the majority of patients are seen for minor to moderate injuries.

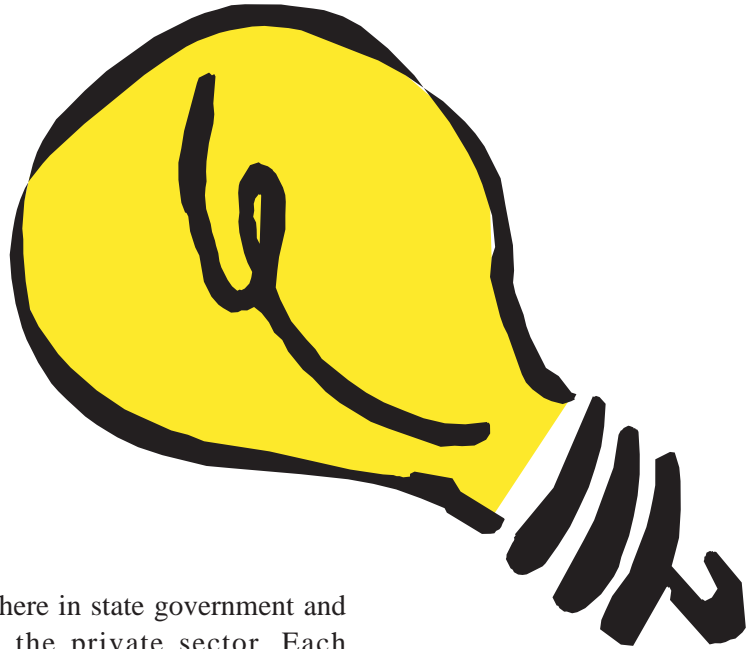


DHHS Steering Committee Looks for Future Leaders

Given the probability that a number of mid- and high-level managers within the Department will be retiring in the next 5 to 10 years, there is great necessity in planning for these positions to be filled with competent and qualified staff. In December 2004, representatives from every agency in the Department met and attended a one-and-a-half day workshop to discuss the issue of succession planning. As a result of the workshop, a steering committee, composed of representatives from various agencies within the Department, was formed to look at succession planning and identify critical human resource needs to ensure that a qualified internal pool of candidates exists to fulfill those needs. Early on, the steering committee chose the acronym “**IDEA**” to best define its objectives:

- Identify the best internal candidates for each position;
- Develop potential successors in ways that best fit their strengths;
- Energize everyone to create a more dynamic environment for change where personal growth is tied to the objectives of the organization; and
- Accelerate our efforts to provide outstanding service to the public.

One of the first efforts of the steering committee is the formation of “**Leadership DHHS**.” Participants in “**Leadership DHHS**” will attend a series of presentations from current leaders within the Department as well



as elsewhere in state government and perhaps the private sector. Each presentation will be followed by discussion and questions and answers to allow participants to relate their own experiences on the topic. Participants will also work in teams on particular challenges or problem areas to develop solutions and recommendations. Through these sessions, participants will learn more about their own leadership styles and capabilities and those of others. The class is expected to be offered on an annual or semi-annual basis to Departmental employees seeking to become tomorrow’s leaders. Information about the nomination/ application process will soon be available.

While “**Leadership DHHS**” is just a start, the steering committee will continue to meet monthly to look at more **IDEAs** to address Departmental human resource and leadership needs now and in the future. Please share

your ideas and suggestions with the following members of the steering committee: Linda Povlich, DHHS Office of the Secretary; Kathy Gruer, DHHS Human Resources; Sandra Trivett, DHHS Office of Policy and Planning; Libby Robb, Division of Vocational Rehabilitation Services; Mark Prakke, Division of Information Resource Management; Jeff Horton, Division of Facility Services; Steve Hairston, Division of Mental Health, Developmental Disabilities and Substance Abuse Services; or Dwight Pearson, Office of Education Services. ■



Jalil Isa

¡Salud y Saludos!

Hispanic Heritage Month

We're about as far into Hispanic Heritage Month as we are into this year's hurricane season – that is, past the midway point, but certainly not near the end. What that means is that we still have time to take some further precautions against any impending tropical cyclone...all the while enjoying and learning some more about an ever-growing culture.

Unlike most other ethnic heritage months, National Hispanic Heritage Month straddles the last half of September and the first half of October. The reason for the unusual time period is its precursor, Hispanic Heritage Week, which was celebrated beginning in 1968, after an act of Congress. The week of Sept. 15 was chosen because several Latin American countries celebrate their independence days on Sept. 15, including Costa Rica, El Salvador, Guatemala, Honduras and Nicaragua. On Sept. 16, Mexico celebrates its independence and Chile's independence day is Sept. 18. It should be noted that Mexico's independence is, indeed, on Sept. 16...and NOT on *Cinco de Mayo* (or May 5) – this day is hardly celebrated in Mexico and simply marks the anniversary of the impressive and unexpected temporary defeat of Mexican troops in the town of Puebla, in 1862.

In 1988, the 100th Congress extended the celebration of Hispanic Heritage Week to a month. It now includes *Día de la Raza* (Columbus Day) during the second week of October. Each year in early September, the President issues a proclamation inviting Americans to celebrate the traditions, ancestry and achievements of Hispanic Americans.

Locally, in North Carolina and in the capital-area, we have had several opportunities to further explore this rich culture. The recent *Fiesta del Pueblo* was probably one of the best spots to get a broad flavor for things. The Department of Health and Human Services supported several booths providing educational materials. This event offered individuals a chance to see some of the variety that comes with Latin America's 20 independent nations. Elsewhere, museums in the area are offering several Spanish guided tours that might provide a variation to previously viewed exhibits. More and more libraries are stocking up on books for Latinos or about them – not to mention there are now countless churches that offer at least a weekly Spanish-language service.

On a recent trip to my hometown of Miami, I had the chance to introduce many aspects of my culture to an Anglo friend of mine who accompanied me. She had never been to the city, knew little about the culture, and wasn't too sure what to expect. After getting a taste of some *pastelitos de guayaba*, *batidos de mamey*, and getting a chance to listen to some of the local music, she came away with a new perspective of me, my family, and the area (granted, this was the day before a hurricane started threatening the area...but she still got the picture!).

That was exactly what I was hoping would happen (not the hurricane part, but the part regarding learning about the culture!) And that's my hope for the rest of the population. I hope we're able to learn from one another by taking advantage of the opportunities that abound. ■

Reed leads National Association

Joy Reed, EdD, RN, head of Public Health Nursing & Professional Development in the Division of Public Health, is the president of the Association of State and Territorial Directors of Nursing (ASTDN). She assumed this role in May at the annual ASTDN meeting in New Orleans.

This is the second time she has headed ASTDN; Reed, who is also Head of the Division's Local Technical Assistance & Training Branch, also served as president of the organization in 2001-2002.

At the annual meeting of the American Public Health Association (APHA), originally scheduled for November in New Orleans and now rescheduled for December in Philadelphia, Joy will be installed as chair of the Quad Council of Public Health Nursing Organizations, also for the second time. The Quad Council is comprised of the four major national organizations addressing public health nursing: ASTDN; the Public Health Nursing Section of APHA; the Association of Community Health Nurse Educators; and the Congress on Nursing Practice and Economics of the American Nurses Association (ANA).

Reed is recognized as a national leader in public health nursing. She is chairing the ANA Committee, which is revising the *Scope and Standards of Public Health Nursing*, and, in her previous term as chair of the Quad Council, led the development of a national set of public health nursing competencies.

She has also been honored by North Carolina public health, having received the Reynolds Award in 2000, given to the individual who made the most significant contribution to public health in N.C. during the previous year, and the



Joy Reed

Dr. Ham Stevens Award in 2004 for "outstanding contributions to local public health." Reed was also the only public health nurse in the inaugural class of the Robert Wood Johnson Executive Nurse Fellows Program. ■

Website cont. from Page 1

The site will be searchable, and all information for residents will be translated into Spanish. Other advantages of the website redesign will be:

- Better customer service
- Reliability of information and ease of use
- Options for navigation that are uniform across the website
- High degree of accessibility for all kinds of users and platforms

- Users won't need to know how DHHS is organized in order to find information

Lois Nilsen of Public Affairs is the project manager for the redesign. "Six content teams with staff from across the department are beginning to meet, and they've got a huge task in front of them. They'll oversee the creation of all of the content about services for North Carolina residents, making information as easy to find as possible. We're a confusing department, so that's no small task!"

DIRM will be instrumental in bringing the project to fruition. Director Karen Tomczak has appointed Maggie Nasso to be the DIRM project manager.

"We're going to create a clean, searchable, highly professional site, something we can all be proud of," said Tomczak. "Maggie will work with Lois and the Web Team to design and develop a site with much more functionality than we currently have, bringing our web presence into the 21st century." ■

Protect yourself and those you love from the flu

It often starts with a headache, cough and sore throat, and it quickly gets worse. You begin to feel achy and every muscle in your body hurts. You become extremely tired. A high fever develops, and your nose is stuffy. For a few days or weeks – you're stuck in bed, feeling miserable. What is it that's causing your pain and discomfort?

The flu.

The flu is worse than the common cold – much worse. It can cause hospitalization and even death.

The best way to prevent the flu is to get a flu vaccination each fall. October or November is the best time to get vaccinated, but getting vaccinated

in December or even later can still help you prevent the flu.

To ensure that people who are at highest risk of complications from the flu have access to vaccine, the Centers for Disease Control & Prevention (CDC) recommend that certain priority groups receive the flu shot between now and October 24, 2005. The following are the priority groups which should receive the flu shot prior to October 24, 2005:

- Residents of long-term care facilities
- People aged 2–64 years with chronic health conditions
- Children aged 6–23 months
- Pregnant women
- Health-care personnel who provide direct patient care
- Household contacts and out-of-home caregivers of children aged <6 months
- People aged 65 years and older, with and without chronic health conditions

On October 24, 2005, flu vaccination will be made available for anyone else who wants it. You can also practice the following healthy habits to help prevent catching and spreading the flu:

- Wash your hands often,
- Avoid touching your eyes, nose or mouth as much as possible,
- Stay away from people who are sick,
- Cover your mouth and nose with a tissue when you cough or sneeze, and
- Get regular exercise, enough rest and eat healthy, balanced meals.

For more information about the flu shot, or to schedule your appointment to get a flu vaccination, contact your doctor today. You can also visit www.immunizenc.com for more information. ■



Central Region Hospital Update



Constuction continues at the CRMH site in Butner.
These photos were taken in mid-September.

WRRC Ribbon-Cutting



Wilson Mayor Bruce Rose joins staff from the Division of Services for the Deaf and Hard of Hearing's Wilson Regional Resource Center (WRRC) at a ribbon-cutting ceremony celebrating the opening of WRRC's new location at 2156 West Nash Street in Wilson.

2005 Conference on Homelessness planned in Raleigh

More than 500 representatives of organizations and agencies that provide shelter and services to North Carolina's homeless people are expected to attend the Ninth Annual North Carolina Conference on Homelessness, Nov. 29 and 30 at the Jane S. McKimmon Center in Raleigh.

Homelessness is no stranger to North Carolina. In the fiscal year ending June 30 more than 45,000 homeless people were served in 132 shelters operating in 53 North Carolina counties through the Emergency Shelter Grants Program. More than 9,000 of those served were children.

Conference registration is \$75 if received no later than Nov. 11 and \$100 thereafter. Conference capacity is limited, so interested people are encouraged to register as early as possible. Registration information is available online at <http://www.dhhs.state.nc.us/homeless/2005conference.htm>.

The conference is sponsored by the Interagency Council for Coordinating Homeless Programs, located within the N.C. Department of Health and Human Services.

For more information, contact Janet Jacobs McLamb at the Office of Economic Opportunity, 2013 Mail Service Center, Raleigh, NC 27699-2013, or telephone (919) 715-5850.

People who have transitioned successfully from homelessness to stability will serve as conference keynote speakers on Nov. 29. Keynote speaker at the luncheon on Nov. 30 is Dr. Don Bartlette, an activist, social worker, counselor, advocate and educator who has spent his life working with children and families in need. A Chippewa Indian, he grew up with severe speech and physical disabilities in an environment of poverty, child abuse, family violence, racism and alcoholism.

The conference will feature workshops on topics such as supportive housing development, public housing advocacy, homeless program funding, educational services for homeless children and youth, serving homeless people with mental illness and substance addictions, nonprofit advocacy, the Homeless Management Information System (HMIS), federal and state funding sources for organizations serving and sheltering the homeless, and the development of the state's and local community 10-year plans to end homelessness.

Nonprofits, businesses, churches and volunteers who have provided outstanding service to homeless people in North Carolina will be recognized during an awards luncheon on Nov. 30. A person who has successfully moved from homelessness will also be recognized. ■

DCD helps youngest Katrina evacuees with Playpacks for Kids



1. Staff with the Division of Child Development joined forces with Child Care Resources Inc., Child Care Services Association and the Southwestern Child Development Commission to create a statewide volunteer program to connect children who have been evacuated as a result of Katrina with backpacks and toys. Child care professionals from across the state contributed new backpacks and toys to the effort, which was dubbed Playpacks for Kids.

2. "Our idea was to give kids something in which to put and protect their things. We are putting in the packs toys, crayons, drawing and writing paper, books, dolls, school supplies, etc. to give them a way to work through the trauma," said DCD Director Peggy Ball. "We are very concerned about the emotional effect that the storm has had on these kids. They need a way to play out the trauma."

Adoption Profile

Introducing Quintaeza

Quintaeza is a friendly and attractive little girl. She enjoys being active and likes to play tennis and basketball. She enjoys going to the beach, to the park, or to play Putt-Putt. Quintaeza loves to shop, play with her dolls, and play house so she can be the "mama." At this time in her young life, Quintaeza is considering many career paths, including teacher, nurse, doctor, veterinarian or store cashier.

Quintaeza attends regular classes at school, where she is challenged to stay on task and works hard to be attentive and focused. She reads very well and responds well to praise and positive reinforcement. Quintaeza needs to remember to let other children have the lead sometimes. Counseling is helping her understand her past and what effect it presently has on her conduct.



Quintaeza
b. March 23, 1996

A Family for Quintaeza

Quintaeza needs adoptive parents who are accepting of and experienced with some of the issues that bring children into foster care. They need to provide a structured and nurturing home where Quintaeza will feel safe and loved. She has developed a close relationship with her foster family and has shown that she can bond and be affectionate. Quintaeza needs a high level of supervision and attention. She has a younger sister who has been adopted with whom she will need ongoing visits and contact. (NC #041-1716)

For more information on this child or adoption and foster care, in general, call NC Kids Adoption and Foster Care Network toll free at 1-877-NCKIDS-1 (1-877-625-4371). ■

Not too late to contribute to State Employees' Combined Campaign

You still have the opportunity to contribute to this year's Combined Campaign. State Campaign Chair Gwynn Swinson has extended the campaign through November 11.

As of September 19, DHHS has collected \$32,512 in campaign pledges. The state campaign office has received additional pledges since then, and they are still auditing them before releasing an updated total. During last year's campaign, DHHS employees contributed \$386,911.

More information about the campaign is available on the Web at <http://www.ncsecc.org>. ■



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